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TYPE PUBLICATION FEE ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$1700 nonprovisional NO \$1400 \$300 12/22/2005 **EXAMINER** ART UNIT **CLASS-SUBCLASS** FOX, JAMAL A 2664 370-392000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). For printing on the patent front page, list 1<u>VENABLE LLP</u> (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. òr agents OR, alternatively, 2 Michael A. Sartori (2) the name of a single firm (having as a member a PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Catherine M. Voorhees Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. 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